

MICHIGAN DEPARTMENT OF AGRICULTURE  
FOOD AND DAIRY DIVISION  
P.O. BOX 30017  
LANSING, MI 48909

**TRAINING CONFIRMATION AND APPROVAL FOR INDUSTRY ANALYST**

(In accordance with Act 266, PA, 2001 or Act 267, PA 2001)

Facility: \_\_\_\_\_

Address: \_\_\_\_\_

Analyst's Name: \_\_\_\_\_ Analyst's ID#: \_\_\_\_\_

Supervisor's Name: \_\_\_\_\_ Supervisor's ID#: \_\_\_\_\_

Test Kit: \_\_\_\_\_

Date of Report : \_\_\_\_\_ Date Received: \_\_\_\_\_

Based on information documented by the Industry Supervisor/ Certified Industry Supervisor the Industry Analyst named above is listed/approved to screen raw milk for drug residues using the test kit listed above effective \_\_\_\_\_ .

\_\_\_\_\_  
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Vermontville, MI 49096-9549;  
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